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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.: 2001_0688A

First Named Inventor : Shunichi NAGAMOTO et al.

Title: MEDICAL CHECKUP NETWORK SYSTEM

Express Mail Label No.:

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. [X] Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. [] Small Entity Status is hereby asserted.
3. [X] Specification
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Sequence Listing, a table, or a computer program listing appendix.
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. [X] Drawing(s) *(35 USC 113)* *(Total Sheets: 15)*
- [X] Oath or Declaration *(Total Pages : 3)*
 a.1. [] Newly executed (original or copy)
 a.2. [X] Unexecuted
 b. [] Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
- i. [] **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. [] Application Data Sheet (see 37 CFR 1.76)

ADDRESS TO: Assistant Commissioner for Patents
 Box Patent Application
 Washington, D.C. 20231

7. [] CD-ROM or CD-R in duplicate, large table or computer program *(Appendix)*
8. [] Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 a. [] Computer Readable Form
 b. Specification Sequence Listing on:
 i. [] CD-ROM or CD-R (2 copies); or
 ii. [] Paper
 c. [] Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. [] Assignment Papers (cover sheet & document(s))
 10. [] 37 CFR 3.73(b) Statement *(when there is an assignee)*
 [] Power of Attorney
 11. [] English Translation Document *(if applicable)*
 12. [] Information Disclosure Statement (IDS)/PTO-1449
 [] Copies of IDS Citations
 13. [] Preliminary Amendment
 14. [X] Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
 15. [] Certified Copy of Priority Document(s)
(if foreign priority is claimed)
 16. [] Request and Certification under 35 U.S.C. 122 (b)(2)(B)(ii).
 Applicant must attach form PTO/SB/35 or its equivalent.
 17. [X] Other **COVER LETTER FOR APPLICATION FILED WITHOUT EXECUTED DECLARATION**

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below, and in a preliminary amendment, or in an Application Data Sheet :

 Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior Application Information: Examiner _____ Group Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference therein. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

000513
PATENT TRADEMARK OFFICE

By:

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May 31, 2001

THE COMMISSIONER IS AUTHORIZED
TO CHARGE ANY DEFICIENCY IN THE
FEE FOR THIS PAPER TO DEPOSIT
ACCOUNT NO. 23-0975.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Shunichi NAGAMOTO et al.

Serial No. NEW : Attn: APPLICATION BRANCH

Filed May 31, 2001 : Attorney Docket No. 2001_0688A

MEDICAL CHECKUP NETWORK SYSTEM

PATENT OFFICE FEE TRANSMITTAL FORM

Assistant Commissioner for Patents,
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Sir:

Attached hereto is a check in the amount of \$998.00 to cover Patent Office fees relating to filing the following attached papers:

New application \$710.00

Assignment for Recordal \$

Additional Claims Fee:

Excess of Twenty \$288.00

Independent \$

Multiple Dependent Fee \$

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.

Respectfully submitted,

Shunichi NAGAMOTO et al.

By Michael S. Huppert

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2001_0688A